



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov

## BIB DATA SHEET

CONFIRMATION NO. 1964

SERIAL NUMBER	FILING or 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.			
09/534,946	03/24/2000 RULE	705	3686	MBHB00-203			
<b>APPLICANTS</b> Frank R. Ruderman, San Carlos, CA; David T. Shewmake, San Francisco, CA; <b>** CONTINUING DATA *****</b> This appln claims benefit of 60/126,003 03/24/1999 and claims benefit of 60/168,354 12/01/1999 <b>** FOREIGN APPLICATIONS *****</b> <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** ** SMALL ENTITY **</b> 05/25/2000							
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and /LENA NAJARIAN/ Acknowledged Examiner's signature		<input type="checkbox"/> Met after Allowance LN Initials	STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS	INDEPENDENT CLAIMS	
			CA	25	20	2	
<b>ADDRESS</b> MCDONNELL BOEHNNEN HULBERT & BERGHOFF LLP 300 S. WACKER DRIVE 32ND FLOOR CHICAGO, IL 60606 UNITED STATES							
<b>TITLE</b> CARDIOVASCULAR HEALTHCARE MANAGEMENT SYSTEM AND METHOD							
<b>FILING FEE RECEIVED</b> 755	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees				
			<input type="checkbox"/> 1.16 Fees (Filing)				
			<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)				
			<input type="checkbox"/> 1.18 Fees (Issue)				
			<input type="checkbox"/> Other _____				
				<input type="checkbox"/> Credit			